U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 5663	2. Fiscal Year Covered From:
	01 / 01 / 2004 Through: $12 / 31 / 2004$
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Floyd F Reichert	Name Sheet Metal Workers Local 213
	Labor Organization File Number 033-405
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 2000 E Summerdawn Dr.	Street 5682 Albatros
City Meridian	City Boise
State Idaho ZIP Code + 4 83642	State Idaho ZIP Code + 4 8 3 7 0 5 - 4 9 1 5
5. Position in labor organization. Business Manager/ F.S	
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu	se or minor child directly or indirectly had any of the following interests sions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or a monetary value from an employer whose employees your organization	derived income or other economic benefit of on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street	
City	
State ZIP Code + 4	
Signa	ature
15. Signature and verification. The undersigned declares, under penalty of f submitted in this report (including the information contained in any accompanyl undersigned's knowledge and belief, true, correct, and complete. (See the second complete)	ng documents), has been examined by the signatory and is, to the best of the
Signed Jacker	On 8-10-05 208-362-5303 Date Telephone Number

Name of Person Filing Floyd F. Reichert		File Number 0-
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or included with your labor organization or with a trust in which your labor organization.	wise dealing with the busines ively seeking to represent, or directly to, or otherwise	S
8. Name and address of Business (including trade name, if any). Name Sheet Metal Workers Local 213 Trade Name, if any: Sheet Metal P.O. Box, Bldg., Room No., if any Street 5682 Albatros City Boise State Idaho ZIP Code + 4 83705-491	9. Business deals with: a. Labor Organiza b. Trust c. Employer	tion
	11.a. Nature of such deali	na
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Southwest Central Idaho Sheet Met Worker Educational Training Trust Trade Name, if any: Sheet Metal P.O. Box, Bldg., Room No., if any Street 5690 Albatros City Boise State Idaho ZIP Code + 4 83705-491	11.b. Approximate dollar values 12.a. Nature of interest held Mar, 08 2004	d or income received.
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	
(including trade name, if any). Name		Section 1 Sectio
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Street City		
State ZIP Code + 4		

Name of Person Filing Floyd F. Reichert	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing directly or included with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise	
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Sheet Metal Workers Local 213	énemonnà	
Trade Name, if any: Sheet Metal	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street 5682 Albatros	Contained Co. Larry Co.	
City Boise		
State Idaho ZIP Code + 4 8 3 7 0 5 - 4 9 1	5	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	naramananan kapanan ka
Name Northwest Sheet Metal Workers		
Health Care Plan Trade Name, if any: Sheet Metal		
P.O. Box, Bldg., Room No., if any		
Street 1322 N.Post		nacionamentalismos milianos inscriminamentalistas en esta esta en esta en esta en esta en esta en esta en esta Quantificación de compositor de esta en esta e
	11.b. Approximate dollar value of such dealing.	ansimis manus assausamen man massaus an ama manasa
City Spokane	40 a Mature of interest held or income receive	4
	12.a. Nature of interest held or income receive See Attached.	d.
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AND AND A TRANSPORT OF THE TRANSPORT OF		d.
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AND AND A TRANSPORT OF THE TRANSPORT OF		
State Washington ZIP Code + 4 99201	See Attached. 12.b. Amount.	
AND AND A TRANSPORT OF THE TRANSPORT OF	See Attached. 12.b. Amount. T parts A and B above)	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	See Attached. 12.b. Amount. T parts A and B above)	
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C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	See Attached. 12.b. Amount. 12.b. Amount. 12.b. Amount. 12.b. Amount.	
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File Number **U-**

Floyd Reicherl	Detail of Exp	ienses/Payments from	Northwest Shee	Detail of Expenses/Payments from Northwest Sheet Metal Workers Health Care Plan
Date of Expense	Amount	Nature of Expense Location	Location	Purpose of Expense
2/4/04 - 2/5/04 Ziájūá - Zi5/04 2/4/04 - 2/5/04 5/18/2004 5/18/2004 6/13/04 - 6/14/04 6/13/04 - 10/6/04 10/5/04 - 10/6/04	\$128.76 50 30 110.21 97.99 108.1 147.25 263.2 137.13	Hotel Room Lunch Lunch Air Fare Hotel Room Air Fare Hotel Room Airfare	Seattle, WA Seattle, WA Seattle, WA Spokane, WA Spokane, WA Seattle, WA Seattle, WA Seattle, WA	Payment of Room for Board meeting attendence Fayment of Lunch at Board meeting Payment of Lunch at Board meeting Reimbursement of Airfare for Board meeting Payment of Room for Board meeting attendence Reimbursment of airfore for attendence at Board meeting Payment of Hotel room for Board meeting Reimbursement of Airfare for Board meeting Reimbursement of Airfare for Board meeting Reimbursement of Airfare for Board meeting

Name of Person Filing Floyd F. Reichert	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actionable (2) any part of which consists of buying from or selling or leasing directly or included in the consists of buying from or selling or leasing directly or included in the consists of buying from the consists of buying from or selling or leasing directly or included in the consists of buying from the consists of bu	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise	
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Sheet Metal Workers Local 213	guaranno);	
Trade Name, if any: Sheet Metal	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 5682 Albatros	C. Litipioyei	
City Boise		
State Idaho ZIP Code + 4 8 3 7 0 5 - 4 9 1		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Norhtwest Sheet Metal Workers Pension Plan Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 1322 N. Post	11.b. Approximate dollar value of such dealing.	Andre militar elementa malamente monumenta malamente de la composición del composición de la composición del composición de la composición
	11.b. Approximate dollar value of such dealing.	SANTANANANAN CARINAANININ AANAAN AANAAN AANAAN
City Spokane	12.a. Nature of interest held or income receive	ed.
City Spokane State Washington ZIP Code + 4 99201		ed.
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AND THE RESERVE OF THE SAME AND	12.a. Nature of interest held or income receive	ed.
AND THE RESERVE OF THE SAME AND	12.a. Nature of interest held or income receive	ed.
AND THE RESERVE OF THE SAME AND	12.a. Nature of interest held or income receive	\$2924.19
AND THE RESERVE OF THE SAME AND	12.a. Nature of interest held or income received. See Attached. 12.b. Amount.	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	12.a. Nature of interest held or income received. See Attached. 12.b. Amount.	
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	12.a. Nature of interest held or income received. See Attached. 12.b. Amount. T parts A and B above) or other thing of value.	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	12.a. Nature of interest held or income received. See Attached. 12.b. Amount. T parts A and B above) or other thing of value.	
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- Delail of Exponses/Payments received from the Northwest Sheel Metal Workers Pension Plan	Purpose of Expense	Payment of Room for Board meeting attendence Payment of Lunch at Board meeting Payment of Lunch at Board meeting Reimbursement of Airfare for Board meeting Reimbursement for parking Reimbursement for dinner Payment of Room for Board meeting attendence Reimbursement of airfare for attendence at Board meeting Reimbursement of airfare for attendence at Board meeting Reimbursement of Room at Education Conference Reimbursement of Airfare for attendence at Education conference Reimbursement of airfare for attendence at Claims Appeal meeting Reimbursement of airfare for attendence at Board meeting Payment of Lunch at Board meeting attendence
ceived from the l	Location	Seattle, WA Seattle, WA Seattle, WA Seattle, WA Seattle, WA Spokane, WA Spokane, WA Las Vegas, NV Las Vegas, NV Las Vegas, NV Seattle, WA Seattle, WA Seattle, WA
xponses/Payments re	Nature of Expense Location	Hotel Room Lunch Air Fare Parking Dinner Air Fare Air Fare Hotel Room Dinner Registration Fee Air Fare Hotel Room
- Detail of E	Amount	\$267.52 30 220.2 26.25 41.71 195.98 216.25 275.7 324.83 28.41 325 263 263 234 413.84 31.5
Floyd Reichert	Date of Expense	2/4/04 - 2/5/04 2/4/04 - 2/5/04 2/4/04 - 2/5/04 2/4/04 - 2/5/04 2/4/04 - 2/5/04 2/4/04 - 2/5/04 5/19/2004 5/19/2004 5/19/2004 5/04/04 - 5/6/04 5/04/04 - 5/6/04 5/04/04 - 5/6/04 5/04/04 - 5/6/04 5/04/04 - 5/6/04 9/20/04 - 9/21/04 9/20/04 - 9/21/04